

November 5, 2007

Los Angeles County Board of Supervisors

TO:

Each Supervisor

Gloria Molina First District

st District FROM:

Bruce A. Chernof, M.D. /Director and Chief Medical

Yvonne B. Burke

Second District SUBJECT:

GRADUATE MEDICAL EDUCATION QUARTERLY REPORT

THIRD CALENDAR QUARTER (JUL-SEPT) 2007

Zev Yaroslavsky Third District

Don Knabe Fourth District

Michael D. Antonovich

The Graduate Medical Education (GME) Quarterly Report for the third calendar quarter of 2007 is attached. Information contained in this report is compiled and reviewed by the Office of Clinical Affairs and Affiliations for all Los Angeles County sponsored residency training programs.

Status of Housestaff Placement at Martin Luther King, Jr.-Harbor Hospital (MLK-H)

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On November 1, 2006, the Charles R. Drew University of Medicine and Science notified the Accreditation Council for Graduate Medical Education (ACGME) of its decision to "voluntarily withdraw" from its role as primary institutional sponsor and to close all fifteen (15) ACGME-accredited residency training programs at MLK-H, effective July 1, 2007. On December 1, 2006, the University executed a plan to place its medical housestaff into educational rotations at other institutions allowing each to complete training requirements for the 2006-07 academic year. The total housestaff complement was two hundred fifty-three (253). Seventy-five (75) housestaff satisfied all training requirements for their residency program by June 30, 2007. An additional seven (7) housestaff were off the ACGME training cycle and completed their training requirements as of October 31, 2007. The University also executed its plan to transfer the remaining medical housestaff, those not yet graduating, to new programs by July 1, 2007, allowing each to complete training program requirements for their specialty. One hundred sixty-nine (169) found permanent placement and two (2) were not placed.

Information in the attached reports reflects the following:

I. Training Program Accreditation Status and Housestaff Totals (Attachment I)

To improve health

through leadership,

service and education.

Total Housestaff: 1,479 (Academic Year 2007-2008)

LAC+USC 903 Harbor-UCLA 488 Olive View 88

On October 10, 2007, the ACGME notified Dr. Lawrence Opas, the Designated Institutional Official (DIO) for Graduate Medical Education at LAC+USC, of its intention to immediately restore full accreditation to the Obstetrics and Gynecology program which was previously on probation. The program was accredited for three (3) years. The Department recognizes this as an achievement since programs with probationary status that achieve full accreditation are customarily granted one (1) or two (2) year accreditation cycles.

The County-sponsored General Dentistry and Oral Maxillofacial Surgery programs previously based at MLK-H are now based at Harbor-UCLA Medical Center.



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II. Medical Specialty/Subspecialty Board Certification Results (Attachment II)

Medical specialty/subspecialty board certification results for 1,506 housestaff who completed County training programs from 2005 through 2007 are presented in this report. A final 2004 update for four hundred twenty-two (422) housestaff is also included. The next verification of board certification status will occur in March, 2008, and will update results for 2005 through 2007. Drew University voluntarily withdrew from its role as primary institutional sponsor at MLK-H effective July 1, 2007, however, certification reporting for MLK-H will continue until the 2007 candidates are deleted from the three-year running totals.

III. Facility Compliance with Resident Supervision Guidelines (Attachment III)

Second Quarter (October - December) of Fiscal Year 2006-07

System-wide audit results, excluding MLK-H, for eleven (11) of seventeen (17) resident supervision indicators met or exceeded the eighty percent (80%) compliance threshold however, opportunities for improvement continue to exist. Aggregate totals for six (6) indicators failed to meet the compliance threshold. Re-audits continue to closely monitor compliance in these areas and the "Best Practices" of services that achieve the highest compliance continue to be shared. Facilities that demonstrate the best performance and/or a greater than fifteen percent (15%) improvement receive cash awards for the purchase of equipment for patient care.

If you have any questions or need additional information, please let me know.

BAC:pd 506:015

Attachments

c: Chief Executive Officer
County Counsel
Executive Officer, Board of Supervisors

Los Angeles County Graduate Medical Education Programs, Accreditation Status and Housestaff Totals 2007-2008

LAC+USC Medical Center

Program

Status

Institution ————	Favorable Continued Full Accreditation Continued Full Accreditation Accredited USC Integrated Full Accreditation Full Accreditation Full Accreditation ADA USC Integrated Accredited ADA USC Integrated Full Accreditation Continued Full Accreditation Continued Full Accreditation Continued Full Accreditation Continued Accreditation Initial Accreditation Initial Accreditation Continued Full Accreditation Full Accreditation Continued Accreditation Continued Accreditation Continued Accreditation Continued Accreditation Continued Accreditation Continued Full Accreditation
Allergy & Immunology ———	Continued Full Accreditation
Anesthesiology	Continued Full Accreditation
Anes: Pain Management———	Accredited USC Integrated
Colon & Rectal Surgery	Full Accreditation
Dentistry —	Full Accreditation ADA USC Integrated
Oral Maxillofacial Surgery	Accredited ADA USC Intergrated
Dermatology	Full Accreditation
Emergency Medicine	Continued Full Accreditation
Family Medicine ————	Continued Full Accreditation USC Integra
Internal Medicine	Continued Full Accreditation
Int Med: Cardiology	Continued Accreditation
int Med: Electrophysiology	Initial Accreditation USC Integrated
Int Med: Card-Intervent -	Accredited USC Integrated
Int Med: Endocrinology	Continued Accreditation
Int Med: Gastroenterology-	Continued Accreditation
Int Med: Geriatrics —	Continued Accreditation
Int Med: Hematology	Continued Accreditation
Int Med: Infectious Disease -	Continued Accreditation
int Med: Nephrology ———	Continued Accreditation
Int Med: Oncology ———	Continued Accreditation
Int Med: Pulmonary Crit Care -	Continued Accreditation
Int Med: Rheumatology ———	Continued Full Accreditation
Neurological Surgery ———	Full Accreditation
Neurology	Continued Full Accreditation
Clinical Neurophysiology ——	Accredited
Nuclear Medicine ———	Full Accreditation
Obstetrics & Gynecology ———	Full Accreditation
Ophthalmology ———	Continued Full Accreditation
Orthopaedic Surgery ———	Continued Full Accreditation
Ortho Surg: Hand	Accredited
Otolaryngology ———	Continued Full Accreditation
Pathology —	Continued Full Accreditation
Cytopathology ———	Continued Accreditation
Hematopathology ———	Continued Accreditation
Neuropathology ———	Continued Accreditation
Selective Pathology	initial Accreditation
Pediatrics ———	Continued Full Accreditation
Peds: Intectious Disease	Accredited
Peds: Medicine	Accredited
Peds: Neonatology	Continued Accreditation
Plastic Surgery ————	Full Accreditation
Plastic Surgery Hand ————	Full Accreditation
Psychiatry —	Continued Accordington
Psych: Child/Adolesc	Continued Accordination
Psych: Forensic	Continued Accreditation
Radiation Unicology	Continued Full Accreditation
Radiology —	According Full Address and
Rad: Neuro	According USC Integrated
Pediatrics Peds: Infectious Disease Peds: Medicine Peds: Neonatology Plastic Surgery Plastic Surgery Hand Psychiatry Psych: Child/Adolesc Psych: Forensic Radiation Oncology Radiology Rad: Neuro Rad: Vasc/Intery Surgery Surgical Critical Care	Continued Full Accorditation
Surgical Critical Care	Full Accordingtion
Surgical Critical Care Vascular Surgery Thoracic Surgery	Accordited USC Interreted
Thoracic Sumer:	Full Accordination
Healens ————————————————————————————————————	Full Accorditation



Program

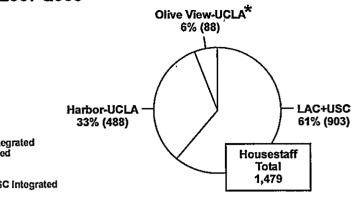
Urology ·

Status

Full Accreditation

Institution ————	Not Required
Internal Medicine	Continued Full Accreditation
Int Med & Emergency Med	Continued Full Accreditation
Int Med: Hematology	Continued Full Accreditation
Int Med: Nephrology	Continued Full Accreditation
Int Med: Oncology	Continued Full Accreditation
Int Med: Rheumatology	Continued Accreditation

^{*}UCLA employed housestaff = 88 (County-sponsored, UCLA-employed)



O Harbor-UCLA Medical Center

Program

Status

•	
Institution ———	Favorable
Anesthesiology	Continued Full Accreditation
Emergency Medicine ———	Continued Full Accreditation
Emerg: Ultrasound ————	Accredited CASE
Family Medicine	Continued Full Accreditation
Family Med: Sports Med	Accredited
General Dentistry	Accredited ADA
Oral Maxillofacial Surgery	Accredited ADA
Internal Medicine	Continued Full Accreditation
Int Med: Cardiology	Continued Accreditation
Int Med: Electrophysiology	Continued Accreditation
Int Med: Card-Intervent	Accredited
Int Med: Dermatology	Provisional Accreditation
Int Med: Endocrinology	Continued Accreditation
Int Med: Hematology	Continued Accreditation
Int Med: Infectious Disease —	Continued Accreditation
Int Med: Oncology	Continued Accreditation
Int Med: Nephrology	Continued Accreditation
Int Med: Pulmonary Crit Care	Accredited
Neurology	Continued Full Accreditation
Neuro: Child	Continued Accreditation w/Warning
Neuro: EEG	Accredited AEEGS
Obstetrics & Gynecology	Continued Full Accreditation
Maternal/Fetal	Accredited CREOG
Female Pelvic & Repro Surg —	Accredited CREOG
Orthopaedic Surgery	Continued Full Accreditation
Ortho Foot & Ankle	Accredited
Pathology ————	Continued Full Accreditation
Pediatrics -	Continued Full Accreditation
Peds: Critical Care	Continued Accreditation
Peds: Emergency Med	Continued Accreditation
Peds: Endocrinology ———	Continued Accreditation
Peds: Infectious Disease	Continued Accreditation
Peds: Neonatology	Continued Accreditation w/Warning
Psychiatry ————	Continued Full Accreditation
Psych: Child/Adolesc	Continued Full Accreditation
Radiology	Continued Full Accreditation
Rad: Body Imaging	Accredited ACR
Rad: Breast/Surgery	Accredited ACR
Rad: Neuro	Continued Accreditation
Rad: Nuclear	Accredited
Rad: Vasc/Interv	Continued Accreditation
Surgery —	Full Accreditation
Surg: Vascular	Continued Accreditation

Accredited by the American College of Radiology (ACR)

Accredited by the American Dental Association (ADA)

Accredited by the American Electroencephalogram Society (AEEGS)

Accredited by the Consortium for the Accreditation of Sonographic Education (CASE)

Accredited by the Council on Resident Education in OB&GYN (CREOG)

All others:

Accredited by the Accreditation Council for Graduate Medical Education (ACGME)

Glossary of Program Accreditation Status

Accredited

Subspecialties only - A Review Committee confers the status of "Accredited" when the dependent subspecialty program has demonstrated substantial compliance with program requirements

Accreditation with Warning

Subspecialties only - A Review Committee may grant "Accreditation with Warning" when the dependent subspecialty has been found to have one or more area of non-compliance with program requirements that are of sufficient substance to require prompt correction.

Continued Full Accreditation

"Continued Full Accreditation" status is conferred when a Review Committee determines that a program continues to demonstrate substantial compliance with program requirements

Favorable

"Favorable" status is conferred when a Review Committee determines that the institution is in substantial compliance with the essential components of Graduate Medical Education

Full Accreditation

A Review Committee grants "Full Accreditation" when a program holding provisional accreditation or probationary accreditation demonstrates substantial improvement and/or compliance with program requirements

Initial Accreditation

"Initial Accreditation" is conferred when a Review Committee determines that a proposal for a new program substantially complies with all program requirements

Probationary Accreditation

"Probationary Accreditation" is conferred when the Review Committee determines that a program has failed to demonstrate substantial compliance with program requirements

Provisional Accreditation

New programs go through a period of "Provisional Accreditation" which implies that a program is in the developmental stage. Provisional Accreditation can be conferred when a program's accreditation was withdrawn and the program has applied to become newly accredited.

Medical Specialty/SubspecialtyBoard Certification for Los Angeles County Department of Health Services Residents and Fellows

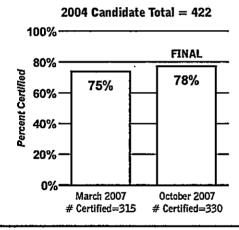
The Office of Clinical Affairs and Affiliations (OCAA) verifies the medical specialty board certification status of County-trained physicians with the American Board of Medical Specialties (ABMS) for the provision of updated results presented to your Board bi-annually.

Reporting Medical Specialty Board Certification

Fifteen of the 24 ABMS medical specialty member boards require two examinations, the written qualifying exam and the oral certifying exam. Nine medical specialty boards require one written certifying exam. Only eight of the 24 boards impose time limitations for initial testing upon completion of residency training. The majority of physician candidates have unlimited time to apply. Data in this report are the results of the certifying examination presented by facility, in three-year running totals. At the end of each academic year, new physician candidates are added while the earliest candidates are re-verified for a final result then deleted from the three-year total.

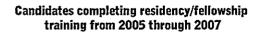
The final verification of 2004 physician candidates, illustrated below, shows a 4.79% increase in certification achievement since the prior March, 2007 verification:

2004
Medical Specialty/SubspecialtyBoard Certification Achievement
<u>Final Results as of October 2007</u>



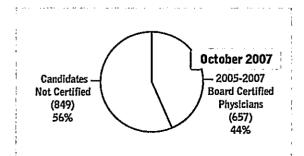
2005 - 2007 Board Certification Results as of October 2007

As of October, 2007, board certification verification was completed for an aggregate total of 1,506 housestaff who completed County training programs in years 2005 through 2007. Forty four percent of the total have achieved board certification. The following pages provide facility-specific certification results.



Candidate Total = 1,506

LAC+USC Medical Center — 805 Harbor-UCLA Medical Center — 400 MLK-Harbor Medical Center — 216 Olive View-UCLA Medical Center — 85



NOTE:

The majority of candidates who recently completed training in June, 2007, have not tested. Many specialty boards will open examinations in the latter months of 2007 and the early months of 2008. In some cases, testing has occurred but the results have not yet posted.

Medical Specialty/Subspecialty Board Certification Los Angeles County DHS Trained Residents and Fellows 2005-2007

Certification Types- General (G), Subspecialty (S)

No Candidates

LAC+USC Medical Center

	2005			2006			2007			INITIAL
PROGRAM	Number of Candidates	Number Certified	% Certified	Number of Candidates	Number Certified	% Certified	Number of Candidates	Number Certified	% Certified	CERTIFICATION TIME LIMIT
Allergy & Immunology (G)	2	2	100%				2	0	0%	No Limit
Anesthesiology (G)	15	12	80%	14	8	57%	17	0	0%	12 Years
Pain Management (S)	l	11	100%				1	0	0%	
Colon & Rectal Surgery (G)	3	2	67%	3	0	0%	3	0	0%	5 Years
Dermatology (G)	2	2	100%	3	2	67%	3	3	100%	No Limit
Emergency Medicine (G)	18	17	94%	17	11	65%	18	0	0%	No Limit
Internal Medicine (G)	54	47	87%	57	40	70%	54	2	4%	No Limit_
Cardiovascular Disease (S)	4	4	100%	4	3	75%	3	0	0%	
Endocrinology (S)	3	3	100%	2	2	100%	3	0	0%	
Gastroenterology (S)	5	5	100%	3	3	100%	5	0	0%	
Geriatric Medicine (S)	2	2	100%	1	1	100%	11	0	0%	· .
Hematology & Med Onc (S)	3	3	100%	4	44	100%	4	0	0%	·
Infectious Disease (S)	2	2	100%	2	2	100%	2	1	50%	
Nephrology (S)	4	4	100%	4	3	75%	4	0	0%	
Pulmonary & Critical Care (S)	4	3	75%	66	5	83%	6	6	100%	
Rheumatology (S)	3	2	67%	3	11	33%	3	0	0%	
Nuclear Medicine (G)	1	0	0%	1	0	0%	1	0	0%	No Limit
Neurology (G)	5	3	60%_	1	0	0%	6	0	0%	No Limit
Neurophysiology (S)				2	0	0%	2	0	0%	
Neurological Surgery (G)	2	0	0%	2	0	0%	2	0	0%	5 Years
Obstetrics & Gynecology (G)	12	1	8%	10	0	0%	12	0	0%	No Limit
Female Pelvic Medicine (S)	1	0	0%	1	0	0%_	1	0	0%	
Gynecologic Oncology (S)				2	0	0%	2	0	0%_	
<u>Maternal-Fetal Medicine (S)</u>				11	0	0%	2	0	0%	
Repro Endocrin & Infertility (S)		1	100%	1	0	0%	1	0	0%	
Ophthalmology (G)	6	4	67%	6	0	0%	6	<u> </u>	17%	No Limit
Orthopedic Surgery (G)	10	0	0%	10	0	0%	10	0	0%	No Limit
Ortho Hand Surgery (S)	1	1	100%	1	0	0%	2	0	0%	
Otolaryngology (G)	4	3	75%	4	0	0%	3	0	0%_	No Limit
Pathology (G)	6	6	100%	12	8	67%	7	1	14%	5 Years
Cytopathology (S)	4	4	100%	4	4	100%	4	0	0%	
Hematopathology (S)	2	0	0%	2	1_1_	50%	<u> </u>	0	0%	:
Neuropathology (S)	1	1	100%		<u></u>		<u> </u>			
Surgical Pathology	7	7	100%	7	5	71%	6	0	0%	
Pediatrics (G)	14	12	86%	15	11	73%	14	4	29%	No Limit
Peds/Internal Med (G)	5	4	80%	2	0	0%	5	0	0%_	
Neonatal-Perinatal (\$)	2		50%.	2	0	0%	4	0	0%_	
Plastic Surgery (G)	2	1	50%	4	0	0%	3	1	33%	2 Years
Psychiatry (G)	9	0	0%	16	2	13%	13	0	0%	No Limit
Child/Adolescent Psychiatry (S)	8	2	25%		<u> </u>	00/	6	0	0%	
Forensic Psychiatry (S)	3	1	33%	4	0	0%	2	0	0%	B1-11-11
Radiology (G)	9	9	100%	12 4	12	100%	10 3	7	70%	No Limit
Intervent Radiology (S)			00/		0	0%		0	0%	
Neuroradiology (S)	1	0	0%	5	0	0%	5	0	0%	No I imit
Radiation Oncology (G)	1 0	1 7	100%	1 4	<u>1</u> 5	100%	1 6	0	0% 0%	No Limit
Surgery (G)	8	7	87%	6		83%		!		3 Years
Surgical Critical Care (S)	2	2	100%	3	3	100%	3	0	0%	No Limit
Vascular Surgery (G)	1	1	100%	1	0	0%	1	0	0%	No Limit
Thoracic Surgery (G)	1 2	1	100%	2	0	0%	2	2	100%	5 Years
Urology (G)	3	0	0%	3	0	0%	3	0	0%	5 Years
TOTALS	257	184	72%	270	137	51%	278	28	10%	ĺ

Medical Specialty/Subspecialty Board Certification Los Angeles County DHS Trained Residents and Fellows 2005-2007

Certification Types- General (G), Subspecialty (S)
No Candidates

Harbor-UCLA Medical Center

	2005			2006			2007			INITIAL
PROGRAM	Number of Candidates	Number Certified	% Certified	Number of Candidates	Number Certified	% Certified	Number of Candidates	Number Certified	% Certified	CERTIFICATION TIME LIMIT
Anesthesiology (G)	5	3	60%	4	0	0%	5	0	0%	12 Years
Dermatology (G)	_		7	1	1	100%	2	2	100%	No Limit
Emergency Medicine (G)	13	12	92%	12	4	33%	12	0	0%	No Limit
Sports Medicine (S)							1	0	0%	
Family Medicine (G)	12	12	100%	11	9	82%_	13	0	0%	No Limit
Sports Medicine (S)	2	0	0%	2	2	100%	3	0	0%	
Internal Medicine (G)	18	18 _	100%	24	18	75%	22	3	14%	No Limit
Cardiology (S)	7	6	86%	5	5	100%	4	0	0%	
Cards-Electrophysiology (S)				2	2	100%	2	0_	0%	
Intervent Cardiology (S)	1	1	100%	3	1	33%	3	2	66%	
Endocrinology (S)	2	2	100%	4	4	100%	7	2_	29%	
Gastroenterology (S)	ī	1	100%							
Infectious Disease (S)	2	2	100%	2	2	100%	2	0	0%	
Nephrology (S)				4	4	100%	1	00	0%	
Oncology/Hematology (S)	3	3	100%	3	2	67%	4	0	0%	
Pulmonary Disease (S)	2	2	100%	2	2	100%	3	3	100%_	
Rheumatology (S)	ĩ	ī	100%							
Medical Genetics (G)	i	1	100%				l			No Limit
Neurology (G)	2	0	0%	2	0	0%	3	0	0%	No Limit
Neurophysiology (S)	2	0	0%	2	0	0%	1	0	0%	
Obstetrics & Gynecology (G)	5	0	0%	4	0	0%	7	0	0%	No Limit
Gynecologic Urology (S)			<u> </u>	1	0	0%	1	0	0%	
Maternal-Fetal Medicine (S)	1	0	0%	1	0	0%	2	0_	0%	
Orthopedic Surgery (G)	3	0	0%	3	1	33%	3	0	0%	No Limit
Foot and Ankle (S)	1	0	0%	1	0	0%	1	0	0%	
Pathology (G)	2	1	50%	2.	1	50%	2	0	0%	5 Years
Surgical Pathology	2	1	50%	3	2	33%	2	1	50%	
Pediatrics (G)	10	10	100%	9	5	56%	11	1	9%	No Limit
Emergency Peds (S)	2	0	0%	1	0	0%	2	0	0%	
Peds Genetics (S)				1	1	100%				
Peds Infectious Disease (S)			_	1	0	0%	•			
Neonatology (S)	2	0	0%	1	0	0%	2	0	0%	
Peds Critical Care (S)	2	2	100%	2	2	100%	2	0	0%	
Psychiatry (G)	6	5	83%	6	0	0%	6	0	0%	No Limit
Child/Adolescent Psychiatry (S)	2	0	0%	3	0	0%	4	0	0%	
Radiology (G)	5	5	100%	5	5	100%	5	4	80%	No Limit
Interventional Radiology (S)	1			1	0	0%				
Neuroradiology (S)	1	0	0%	1	1	100%	1	1	100%	
Surgery (G)	4	3	75%	5	5	100%	5	1	20%	3 Years
Vascular Surgery (G)	<u> </u>		T	1	1	100%	1	0	0%	No Limit
TOTALS	120	91	76%	135	80	59%	145	20	14%	

Medical Specialty/Subspecialty Board Certification Los Angeles County DHS Trained Residents and Fellows 2005-2007

Certification Types- General (G), Subspecialty (S)
No Candidates

	MLK-Harbor	Medical	Center
	MITICALIBIDA	MICHICAL	ACHICA

		2005			2006			2007		INITIAL
PROGRAM	Number of Candidates	Number Certified	% Certified	Number of Candidates	Number Certified	% Certified	Number of Candidates	Number Certified	% Certified	CERTIFICATION TIME LIMIT
Anesthesiology (G)	6	3	50%	3	0	0%	3	0	· 0%	12 Years
Dermatology (G)	2	2	100%	2	2	100%	2	2	100%	No Limit
Emergency Medicine (G)	12	9	75%	11	1	9%	11	0	0%	No Limit
Family Medicine (G)	7	7	100%	7	7	100%	7	0	0%	No Limit
Internal Medicine (G)	13	13	100%	11	9	82%	20	0	0%	No Limit
Endocrinology (S)	3	3	100%	3	3	100%	2	0	0%	
Gastroenterology (S)	2	2	100%				1	0	0%_	
Geriatric Medicine (S)	5	1	20%	3	0	0%	5	0	0%	
Infectious Disease (S)	1	1	100%	1	1	100%	11	0	0%	
Obstetrics & Gynecology (G)	4	0	0%	1	0	0%	2	0	0%	No Limit
Ophthalmology (G)	1	11	100%	2	0	0%_	2	0	0%	No Limit
Orthopedic Surgery (G)	4	0	0%							No Limit
Otolaryngology (G)	2	2	100%_	1	1	100%	1	0	0%	No Limit
Pediatrics (G)	14	6	43%	13	2	15%_	11	Ö	0%	No Limit
Psychiatry (G)	4	1	25%	7	0	0%	3	0.	0%	No Limit
TOTALS	80	51	64%	65	26	40%	71	2	3%	

Olive View-UCLA Medical Center

		2005			2006			2007	INITIAL	
PROGRAM	Number of Candidates		% Certified	Number of Candidates	Number Certified	% Certified	Number of Candidates	Number Certified	% Certified	CERTIFICATION TIME LIMIT
Internal Medicine (G)	19	17	89%	13	12	92%	33	00	0%	No Limit
Hematology & Med Onc (S)	1	11	100%	2	0	0%	4	0	0%	
Int Med & Emer Med (S)	1	1	100%_				2	0	0%	
Nephrology (S)	2	2	100%	3	3	100%	2	0	0%	
Rheumatology (S)	1	.1	100%	1	1	100%	1	0	0%	
TOTALS	24	22	92%	19	16	84%	42	0	0%	

- 1. **Obstetrics and Gynecology** candidates, after passing the qualifying written exam, must provide unsupervised patient care for at least 12 months prior to admission to the certifying oral exam. Certification results reflect little or no change due to the additional time requirement
- 2. Orthopedic Surgery candidates must first qualify by passing the written exam. There are two certifying exams. The candidate must pass the oral exam prior to admission to the clinical on-site exam. There are little or no changes in the verification results due to a 22-month in-practice requirement
- 3. Surgical Pathology is not yet an ACGME-recognized fellowship nor is it an American Board of Pathology subspecialty. Surgical Pathology programs, sanctioned by the ACGME began under the auspices of Selective Pathology. In order to practice Surgical Pathology, the fellow must pass the Anatomic Pathology portion of the primary certifying exam.
- 4. Urology candidates have two qualifying requirements. After passing the written exam, candidates must engage in a minimum of 18 months of urological patient care before qualifying to sit for the certifying oral exam. Certification results reflect little or no change due to the additional time requirement

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Los Angeles County Department of Health Services Audit of Compliance with Resident Supervision Guidelines DHS Policy Number 310.2

<u>Fiscal Year 2006-2007</u> October - December, 2006

In the second quarter of fiscal year 2006-07, nurses from the Department of Health Services' Quality Improvement Patient Safety Program (DHSQIPS) audited each teaching facility abstracting compliance information for seventeen inpatient indicators. The indicators, based on resident supervision guidelines, included eight surgical indicators, three ward/discharge indicators, three ICU indicators and three invasive procedure indicators.

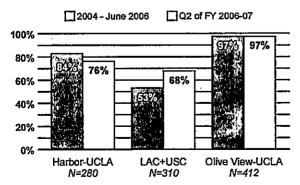
Data was collected from a sampling of hospital discharges with focus on the following services:

FACILITY	SERVICES
Harbor-UCLA	Internal Medicine
LAC+USC	Bums Hepatobiliary Tumor/Endocrine
Olive View-UCLA	Internal Medicine

Findings

System aggregates demonstrated a significant improvement of 28% at LAC+USC, no change in improvement at Olive View-UCLA, and a 9.5% decrease in improvement at Harbor-UCLA. The compliance threshold is 80%.

System Aggregates: Seventeen Inpatient Indicators 2004 - June 2006 compared with Q2 of FY 2006-07



NOTE: Sample sizes are based on the projected number of annual discharges per service

Findings (continued)

System-wide audit results for eleven indicators met or exceeded the 80% compliance threshold however, opportunities for improvement continue to exist. The threshold was not met for the three ward indicators at Harbor-UCLA and LAC+USC and, the three ICU indicators at LAC+USC as follows:

System-wide Non-compliance with 80% Compliance Threshold

INDICATOR	Harbor	LAC+USC	Olive View
WARD-ADMIT Admissions note was signed and/ or co-signed by the Attending within 24 hours of admission	68%	44%	
WARD - DAILY Daily progress note indicates it was signed, co-signed or dis- cussed with Attending Q48 hours	71%	22%	
WARD/DISCAHRGE Documentation reflects that the Attending concurs with the dis- charge plan	68%	22%	
ICU-4HR The resident documented that he/she discussed the patient with the Attending or supervising resident within 4 hours of admission to the ICU	,	50%	
ICU - ADMIT The Attending documented evaluation of the patient and discussed with the resident within 24 hours of admission to the ICU		36%	
ICU - DAILY The Attending documented daily evaluation of the patient or the resident documented daily evaluation that he/she discussed the case with the Attending		23%	

Conclusion

Each service failing to meet the 80% compliance threshold submits, to its facility governing body, corrective action plans addressing each deficiency. The "Best Practices" of services that achieve the highest compliance continue to be shared with those who fail to meet the threshold.

Facilities demonstrating the best performance and/or a greater than 15% improvement receive cash awards. These awards are released to the facility Quality Patient Care Fund or its equivalent to be used as described in the Committee of Interns and Residents' Memorandum of Understanding (if applicable) for the purchase of equipment for patient care.

Next Report

The next report will present resident supervision audit results for the third quarter (January through March, 2007) of fiscal year 2006-07.